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Selection criteria for foster daycare parents

Summary

The foster daycare programme focuses on children from a problematic rearing situation, who are placed in foster daycare families for a part of the day. One of the key issues is to select suitable foster day care parents for guiding a foster daycare child. It emerges from the results that there is a fair chance that foster daycare parents with a poor parenting discipline will cease to be available as foster daycare parents. It also appears that an early discontinuation of a placement is associated with a non-optimal fit between child and foster daycare parents. Foster daycare parents with a poor quality of parenting discipline have a greater chance of terminating the placement prematurely than foster daycare parents with a good quality of discipline. It may be concluded that foster daycare parents with a high-quality parenting discipline are suitable foster daycare parents.

Introduction

In the Netherlands the impulse towards the foster daycare programme was given by the practice of youth care. More or less at the same time, various health professionals reached the conclusion that the available forms of youth care failed to respond to the problems of a specific group of children and their parents. The children concerned are those who are difficult to fit in a group under treatment of a rearing facility. Curtis, Rosman & Pappenfort (1984) believe to have found a solution by placing these children in ordinary families and by guiding both families from the care facility. This constitutes the core of the foster daycare programme.

Foster daycare in the Netherlands has been developed by six cooperating Boddaert centres. A Boddaert centre supplies a form of treatment for children and their parents in which the child stays in a group under treatment for some hours during weekdays and the parents are guided from the centre. A family is eligible for care from a Boddaert centre when a problematic rearing situation is involved, i.e. when the rearing situation has stagnated to such an extent that the people involved feel they have reached a dead end (Ter Horst, 1980). A problematic rearing situation is characterized by the occurrence of emotional and behavioural problems in the child, which are manifest in the home situation and often at school and in peer relati-

onships. In many cases, the disturbed rearing relationship is associated with the occurrence of problems on the part of the parents (depression, marital problems) and with their situational context (unemployment and an isolated position in the social environment). Parents in a problematic rearing situation can apply for foster daycare if they are eligible for daycare from a Boddaert centre, if the child does not fit in a treatment group and if the parents are committed to long-term care, resulting in the child's unnecessary prolonged stay in the group. Foster daycare can be defined as the placement of a child for some hours a day during weekdays in a recruited and selected foster daycare family. The child's own family and the foster daycare family are both guided from the Boddaert centre. The foster daycare children go to the foster daycare families after school-hours and remain there till seven to eight in the evening.
Foster daycare was an experimental three-year programme, set up in order to study the question whether this form of care can be incorporated in the care system in the Netherlands. The present study aims to answer this question.

Research question

One of the subquestions of the study was, 'Which parents qualify as foster daycare parents?' Which foster daycare parents are suitable for foster daycare and which are not? Parallel to this question, research in the area of foster care has concentrated on the relationship between the favourable outcome of the placement and its associated factors. The literature suggests that a favourable outcome is related to the following factors.

1 Foster parents need to be trained before a child is placed. Apart from the opportunity to learn certain skills, the training sessions also offer the opportunity for candidate foster parents to think things over. According to Pasztor (1985), Smith and Gutheil (1988) the unsuitable foster parents will exclude themselves from participation and this reduces the chance of premature discontinuation of the placement as well as drop-out (withdrawal) of the parents (Simon & Simon, 1982; Gil, 1984; Urquhart, 1989; Titterington, 1990).
2 Foster children should not present severe emotional and behavioral problems (Pardeck, 1983; Gil, 1984). Foster children with severe emotional and behavioral problems tend to move from one foster placement to another. Larsson, Bohlin en Stenbacka (1986) contend that once emotional and behavioral problems are present, they are both the cause and the result of these multiple placements.
3 There should be a good understanding between foster parent and counsellor. A negative correlation is found between foster parent drop-out and the contacts with the counselor, both in a qualitative and quantitative sense (Stone & Stone, 1983; Pardeck, 1985; Appathurai, Lowery & Sullivan, 1986; Steinhauer, 1988; Urquhart, 1989).
4 Foster parents should be given more responsibilities as they will be treated as professional staff members (Tinney, 1985; Urquhart, 1989; Titterington, 1990). It is necessary, therefore, for the foster parent to be well-informed about the child's background in an early phase of the placement and to become involved in the process of deciding whether or not to discontinue the placement (Goldbeck, 1984; Pasztor, 1985; Spaans, Berben & Reeuwijk, 1989; Urquhart, 1989).

5 The parents' involvement in the decision to opt for placement will be beneficial to the child's development (Reeuwijk & Berben, 1988). The biological parents and foster children appear to have a need for mutual contact. 'Relatively many parents have a positive idea about the contact between parents and foster parents, while the foster parents had generally adopted a negative attitude in this respect' (Spaans *et al.*, ibid, p. 152). From other studies it appears that the duration of the placement is reduced due to the frequent contacts between parent and counselor and the parents' visits to the foster home (Gibson, Tracy & DeBord, 1985; Seaberg & Tolley, 1986; Milner, 1987).

Two remarks can be added to this overview. Firstly, the results depend on the choice of the dependent variable (definition of criteria of success). So far there has been no consensus on this aspect and various definitions are being used (Scholte, 1995). Secondly, in studies of a less recent date researchers attempted to find a connection between foster child and foster family characteristics on the one hand and the outcome of the placement on the other. At a later stage the researchers also included the characteristics of interaction between counsellors and parents in their design. From these multivariate analyses it emerges that the most important predictors of success are the contacts between the children and the placement counsellors (Stone & Stone, 1983; Lawder, Poulin & Andrews, 1986; Milner, ibid.). These studies, however, do not present a picture of the composition of the populations in terms of the crisis/long-term ratio and the network/profile placements ratio (foster child and foster family do not know each other). Consequently, the results that are found are strongly dependent on the population in question.

In foster daycare, four of five of the conditions mentioned above have been fulfilled to realise a successful placement: the foster parents follow a preparatory programme, they receive intensive supervision during placement, they attend treatment evaluations and there is close contact with the (biological) parents (Strijker & Zandberg, 1994; Strijker, 1995). This study will concentrate on the characteristics of both the foster daycare child and the foster daycare family.

In the Netherlands there has been little research in the area of foster care. The literature review by Robbroeckx & Bastiaensen (1992) and the study by Scholte (ibid.) suggest that the main focus of attention is on establishing a link between the failure of placement and the characteristics of foster children and their foster families. Both studies show that the success of a placement is related to the following factors:

- age of the foster child (the younger the foster child, the higher the success rate);
- gender of the foster child (boys are less successful in foster families than girls);
- the foster parents' pedagogical attitude (an authoritative [commanding] approach appears to increase the chance of failure);
- the presence of severe emotional and behavioral problems in the child.

(As there is no consensus on the additional factors, we decided to leave them out of the scope of this study.) A number of the factors mentioned above are also expected to emerge in this

study on the selection criteria for foster daycare parents and the success of a placement.
In order to discriminate between suitable and unsuitable foster daycare parents, it seems plausible to opt for the dichotomous variable 'the foster daycare parent has or has not terminated the placement'. The next step would be to trace the characteristics of the foster daycare parents that are associated with this variable. The problem is, however, that the discontinuation of a placement, fore example, need not be exclusively attributed to the characteristics of the foster daycare parents, since it could also have been the result of poor matching. The foster daycare child and the foster daycare family may not be suited in certain respects. In other words, a placement's termination by the foster daycare parent may (1) be related to certain characteristics of the foster daycare family but may (2) also be the result of poor matching. In addition to terminating the placement, the foster parents may also decide to (1) leave the programme or (2) to take another foster child into their home. If the dichotomous variable 'continuation or discontinuation' is considered to be antecedent and the consequent (or dependent variable) is described as 'withdrawal or non-withdrawal from programme', the four following combinations can be found as presented in figure 1.

1 The foster daycare parent discontinues (A) a placement and withdraws from (B) the programme $(B \mid A)$.
2 The foster daycare parent discontinues (A) a placement but takes $(\bar{B})$ another child $(\bar{B} \mid A)$.
3 The foster parent does not discontinue $(\bar{A})$ the placement and withdraws (B) after termination by, for example, the parents $(B \mid \bar{A})$.
4 The foster daycare parent does not discontinue the placement $(\bar{A})$ and takes up another child $(\bar{B})$ after discontinuation by, for example, the parents $(\bar{B} \mid \bar{A})$.

Figure 1. *Conceptual framework*

		Consequent	
		B	$\bar{B}$
Antecent	A	$B \mid A$	$\bar{B} \mid A$
	$\bar{A}$	$B \mid \bar{A}$	$\bar{B} \mid \bar{A}$

It is believed that the foster daycare parents who discontinue a placement (B) and withdraw (A) are the unsuited foster daycare parents $(B \mid A)$. These foster daycare parents seem to be unsettled after a single failure. The question of 'Which parents qualify as foster daycare parents ?' can now be split into three subquestions.

1 What are the characteristics of the foster daycare parents who withdraw from the programme?
2 What are the characteristics of the placements that are discontinued by the foster daycare parents?

3 To what extent is there a correlation between discontinuation of a placement by the foster daycare parent and the characteristics of the foster daycare family and what is the chance of termination?

The analyses take place in two steps. Firstly, a statistical significant association is sought between an independent and a dependent variable (or set of variables). If an association can be ascertained, the second step is to examine the selection characteristics of the questionnaire (or combination of the set of variables). In order to establish the characteristics of the selection model, it was decided to use the concepts from medical diagnostics (see e.g. Patton, 1978; Westenberg & Koele, 1993). In the results section, the selection concepts are highlighted using figure 1.

In conclusion, it is observed that children from the same biological family stay in the same foster daycare family and that children from different biological families also stay in the same foster daycare family. In order to keep the results of the analyses as free from bias as possible, correction has taken place on each analysis so that the size of the group will differ per analysis.

Method

The research subjects are the six executives of the programme, i.e. the social workers of the programme who guide the parents and foster daycare parents. The executives have all had higher vocational education, sometimes followed by a specialized training course on family treatment.

Prior to a child's placement in a foster daycare family, data are collected of the child, the parents and the foster daycare family. Dependent on this information, the following questionnaires are used.

1 The COM-procedure (Mesman-Schultz, 1978; Van den Boogaart, MesmanSchultz, Naayer & Zandberg, 1989). The COM-list is used to describe the psycho-social background of foster daycare children. The scale comprises 57 questions (including sex and ethnic-cultural background) with well-described answering alternatives to each question. The 57 items have been aggregated to 16 sum variables, including an index for the total background problems. The sum variables describe the family situation, the family's societal integration, the child's behavioral problems and its contacts with its environment (school and society). This list is filled in by a social worker after the foster daycare child has been placed in a foster daycare family.
2 The COM-supplemental list (Strijker & Zandberg, 1991). This list comprises 10 items on the social and economic background of the parents and the foster daycare parents, e.g. the mother's vocational education and the number of children in the foster daycare family. The social worker and the COM complete this list at the same time.
3 The questionnaire entitled 'Social Interaction and Discipline'. Two items have been derived from the 'Family Day Care Rating Scale (Harms & Clifford, 1989) in order to verify the quality of social interaction and parenting discipline in the foster daycare family. Each item describes four levels of quality: level one means insufficient (the child's develop-

mental psychological needs are not satisfied), level two means minimal (the basic needs are fulfilled, but only to a certain extent), level three means good (the basic needs are fulfilled) and level four means excellent (high quality of individual care). In the analysis of the research results, the 'insufficient' and 'minimal' levels have been condensed into the category 'poor', and 'good' and 'excellent' into the category 'good'. The quality of parenting discipline is 'poor' when, for example, the parent does not complete punishment, when the parent fails to anticipate problems adequately, or when the parent exercises too little control over the child. High-quality parenting discipline means, for example, that a parent explains the reasons for certain rules or when the parent and the child together find positive solutions to particular problems. The social worker completes this questionnaire six months after the foster child's placement. After this period of time the executive will know the foster family well enough to be able to do so.

4 Finally, information is gathered from the social workers concerning those who take the initiative to discontinue a placement.

Results

In this section three subquestions are dealt with, as formulated in the section on the research question.

Subquestion 1: 'What are the characteristics of the foster daycare parents who leave the programme?'

Ten out of the 31 foster daycare parents who had the care of one or more foster daycare children during the study, have withdrawn from the programme. In the case of five foster daycare parents this was due to new work or removal; five other foster daycare parents decided to withdraw because of problems with the foster daycare children and/or their parents. According to the executives, the foster daycare parents' withdrawal correlates with the problems in the daily routine between foster parents and/or their foster child. On the basis on the information given above, three groups can be formed: 'Withdrawal due to problems', 'Withdrawal because of removal' and 'Continuation'. The category 'Withdrawal because of removal' is excluded from the analysis, as it may be assumed that there is no logical relation between the quality of discipline and the parents' moving house. If, analogous to figure 1, the 'Withdrawal' (because of problems) and 'Continuation' groups are regarded as the consequent and 'Discipline' as the antecedent, the following contingency table will emerge.

Table 1. *Contingency table presenting the quality of the discipline as antecedent and the mutation in the foster daycare file as consequent*

Category	Withdrawal	Continuation	Row total
Poor	4	1	5
Good	1	20	21
Column total	*5*	*21*	*26*

Table 1 shows that of the 21 foster daycare parents that offered high-quality parenting discipline, one has left and that of the five foster daycare parents that offered poor-quality discipline, four have left the programme. The categories are mutually dependent ($\chi^2=8.29$, $df=1$, $p<.01$). In a prospective study, the strength of the relationship between an antecedent factor and an outcome is expressed in 'relative risk'. The relative risk is the ratio between the occurrence of an event in which there is a factor present and the occurrence of that event when this factor is missing. With the help of figure 1, the relative risk can be defined as:

$$\frac{P(B \mid A)}{P(B \mid \bar{A})}$$

(Fleiss, 1981). In table 1 the relative risk amounts to 17. This means that foster daycare parents that offered poor-quality discipline are 17 times as likely to withdraw from the programme than the foster daycare parents who offered high- quality discipline. If candidate foster daycare parents were to be screened on their parenting discipline, this group's sensitivity $P(A \mid B)$ (percentage of correctly classified drop-outs) would be 80%. The base rate or chance if the selection does not take place can be defined as

$$\frac{n_{AB}+n_{\overline{AB}}}{N} x100\%$$

and amounts to 19% (Drenth & Sijtsma, 1990). This is strikingly lower than the 80% selection after the introduction of the discipline questionnaire. The predictive accuracy, the chance that the foster daycare mother will indeed discontinue the programme due to poor parenting quality [$P(B \mid A)$], also amounts to 80%. On the basis of this information, the quality of parenting discipline seems to qualify as a screening instrument.

Subquestion 2: 'What are the characteristics of the placements that are discontinued by foster daycare parents?'
In the previous research question we investigated a connection between a foster daycare parent characteristic and withdrawal from the programme. As argued in the first section, candidate foster parents may discontinue a placement prematurely but may also take up another foster daycare child (non-withdrawal from the programme). It is also possible for them to withdraw from the programme after discontinuation by the birth parents. In the following analysis, a relation is sought between discontinuation by the foster daycare parents on the one hand and a combination of placement characteristics on the other (foster daycare family characteristics and foster daycare child characteristics). (Considering that there are more children than foster daycare parents, the size of the group will be larger in comparison with the previous analysis.) In order to provide an indication at the outset of the placement as to whether a foster daycare parent will or will not discontinue the placement, a prognostic discriminant analysis has been applied. This means that we are looking for an additive linear combination of initial characteristics (of foster daycare parents and daycare children) that helps explain the possible premature discontinuation of a placement. The socio-demographic variables (according to the COM-sup-

plemental list) 'Social interaction' and 'Discipline' are included as predictor variables. In the discriminant analysis (Wilks' method) the following variables have been included: 'Number of natural children in foster daycare family: Child' (Wilks *lambda* .78, F=4.77, df=2, p<.05), 'Education of the foster daycare mother: Educ' (Wilks *lambda*=.72, F=4.77, df=2, p<.05) 'The child's social problems: SPC' (Wilks' *lambda*=.68, F=3.70, df=3, p<.05). The function is statistically significant (Wilks' *lambda*=.68, χ^2=9.26, df=3, p<.05) and the canonic correlation coefficient amounts to .57. The standardized discriminant weights amount to .61 for 'Number of children in the foster daycare family', .50 for 'Education of the foster daycare mother' and .42 for 'The child's social problems'. The unstandardized discriminant weights are found in the following discriminant formula:

$$D = -3.01 + .64SPC + .63child + .39edu$$

This function can be interpreted as follows: the more social problems the foster daycare child has and the more natural children there are in the foster daycare family and the higher the level of education of the foster daycare mother, the greater the chance that the placement will be discontinued by the foster daycare parent. The classification results of the discriminant function are found in table 2.

Table 2. *Classification results of the predicted group membership on the basis of discriminant function*

Actual group	**Predicted group membership**	
	Discontinued	*Continued*
Discontinued (N=8)	6 (75%)	2 (25%)
Continued (N=19)	3 (12%)	16 (88%)

On the diagonal (from top left to bottom right), the number of cases can be found which were placed in the right group, the outer diagonal elements represent the incorrect classifications. The efficacy of the model, the total number of correctly classified cases

$$\frac{n_{AB}+n_{\overline{AB}}}{N} x100\%$$

amounts to 82% (see figure 1). The sensitivity of the discriminant function amounts to 75% and the predictive accuracy amounts to 67%.

Considering the fact that it fits the data to a considerable extent, the model could be applied as a descriptive decision model in order to gain insight into the chance of a prematurely discontinued placement. The objective of the determiner is to select a threshold value that makes an optimal distinction between placements that have been discontinued prematurely and those that have not. The choice of a high threshold value leads to more certainty that a placement will indeed be discontinued, but it will also increase the chance of a false signal. By

increasing the critical criterium score, more suitable candidates will fail to meet the standard. In this case an optimum should be sought between the percentage of placements that have indeed been discontinued by the foster daycare parents, in accordance with the formula (True Positive Proportions: $P(A \mid B)$, see figure 1) and the percentage of placements that were discontinued according to the formula but which in reality have not been discontinued (False Positive proportions: $P(A \mid \bar{B})$, see figure 1). In table 3 the bivariate proportions of true positives (TPP) and false positives (FPP) are presented with predictive accuracy. (Note that the percentage of true positives is identically defined as the sensitivity.) It is common practice to express the results in a graphic curve. However, due to the limited number of critical marginal values we restrict ourselves to a table (see Metz, 1978).

Table 3. *Proportions of true positives, false positives and predictive accuracy for each established cut-off point*

Discriminant score	TPP	FPP	Pred. accur.
D≥-.60	37%	11%	88%
D≥.00	55%	13%	75%
D≥.25	67%	11%	75%
D≥.50	63%	11%	71%
D≥.75	83%	14%	63%

The optimum lies at the threshold value of D>.25: 67% of the placements terminated by the foster daycare parents are detected and the loss has been reduced to a minimum of 11%. The predictive accuracy of the formula in this case amounts to 75% (the chance that, on the basis of a D>.25, the placement will indeed be discontinued by the foster daycare parent).

After answering the subquestion of 'What are the characteristics of the placements that have been discontinued by the foster daycare parents?', the following conclusions can be drawn.

1 The discontinuation of a placement by a foster daycare parent is explained by the constellation of child and parent characteristics (the severity of the child's social problems, the number of the foster daycare parents' natural children and the foster daycare mother's level of education).
2 The model may serve as a descriptive decision model, meaning that prior to placement the risk of termination by a foster daycare mother can be estimated. If, according to the decision-maker, the risk of a premature discontinuation is too high, he or she may decide to call off the combination and admit the referred child to another foster daycare family.

In the discussion section some remarks will be added to these conclusions.

Subquestion 3: 'To what extent is there a relationship between the discontinuation of a placement by a foster daycare parent and the characteristics of a foster daycare parent and what is the chance of discontinuation?' In order to answer this subquestion, the following dichotomous criteria were interconnected in a cross-table. The results are presented in table 4.

Table 4. *Frequency table with the quality of discipline as the antecedent and the originator of termination of placement as the consequent*

Category	Discontinued by fostd. par.	Continued by fostd. par.	Row total
Poor discipline	4	2	6
Good discipline	4	15	19
Column total	8	17	25

The Chi-square test of independence shows that the categories depend on each other (χ^2=4,36, df=1, p<.05). This means that there is an association between the quality of discipline and the originator of discontinuation of placement. The relative risk is 3, meaning that foster daycare parents who offer poor-quality parenting discipline are three times more likely to discontinue the placement than foster daycare parents who offer high-quality parenting discipline. The sensitivity amounts to 50%, which means that foster daycare parents who offer poor-quality discipline discontinue as many placements as foster daycare parents who offer high-quality discipline. The aselect success ratio of base rate amounts to 32%. In sum the following findings can be observed:

1 foster daycare parents who offer poor-quality discipline have a higher chance of discontinuing a placement than foster daycare parents who offer high-quality discipline;
2 the chance of detecting a prematurely discontinued placement with the use of the 'quality of parenting discipline' questionnaire is not much higher than the chance rate (50% versus 32%).

Discussion

It can be concluded from the results that the foster daycare parent characteristics are related to the parenting discipline in the foster daycare family, as ascertained by the executives. Foster daycare parents who offer poor-quality parenting discipline have more chance of withdrawing from the programme than foster daycare parents who offer high-quality parenting discipline. At the same time there appears to be a connection between the quality of parenting discipline and discontinuation of the placement by the foster daycare parent. It may be concluded that foster daycare parents who offer inadequate parenting discipline are unsuitable foster daycare parents. As to the selection characteristics, the 'quality of parenting' questionnaire appears to adequately predict the withdrawals from the program compared with the chance (the aselect ratio of base rate amounts to 19% and the sensitivity amounts to 80%). Nevertheless, this questionnaire seems less suitable as an instrument to detect the foster daycare parents who discontinue the placement prematurely: the sensitivity amounts to 50% versus 32% for chance. The discriminant function seems a more appropriate tool: 75% of the placements that were discontinued prematurely were correctly classified by this function.

One problem in the statistical analysis is the small size of the group. As a result, the chance of a type I error increases: actual differences are not observed due to the small size of the

group. Notably, in the discriminant analysis the ratio between the sample size and the number of predictor variables is small. The significance tests should, therefore, be interpreted cautiously. A possible solution of statistical significance may be the use of a more liberal level of significance (Stevens, 1992). In addition to the statistical significance level, the clinical significance level is also considered important. In this respect the accuracy of the discriminant function is believed to be important and should consequently be cross-validated by bootstrapping. In doing so the data are split up randomly, the function is designed on the basis of one of the two samples and then the hit rate on the other random sample is checked, i.e. the number of correct classifications is assessed. This procedure offers a good check-up on the external validity of the classification function (Stevens, ibid.). In the study in hand, the size of the group appeared to be too small for this validity procedure.

The importance of the aspect of validity should be approached with caution. Even though the validity of a discriminant function or a questionnaire may be high, the function or questionnaire loses its practical utility if the sensitivity turns out to be low. In spite of statistical significance and favourable overall classification results, the function or questionnaire cannot be employed practically if the sensitivity is low. The crucial thing is that the persons in question cannot be detected.

Finally, it is also important to include the 'costs' (proportion of false positives) in the evaluation of the utility question. Even if many false positives are revealed compared with the proportion of true positives, the diagnostician or decision-maker will still have doubts about the utility of the test if considerable emotional and/or financial costs are involved (see Drenth & Sijtsma, ibid.; Stevens, ibid.). For the time being, it can be maintained, based on the evaluative dimensions, that the 'quality of parenting discipline' questionnaire and the discriminant function seem promising instruments to screen prematurely discontinued placements and drop-out in foster daycare parents.

A problem of an entirely different nature is that the 'quality of parenting discipline' questionnaire was conducted by the executive six months after the child's placement in the foster daycare family. It was believed that this would give the executive enough time to become sufficiently acquainted with the foster family to be able complete the questionnaire accurately. During this period of time, some placements were discontinued prematurely. As a result of the unfavourable outcome of the placement the answers in some questionnaires may be distorted in a negative sense.

It is interesting to note that the quality of parenting discipline is associated with premature discontinuation of the placement and with the foster family's withdrawal from the programme. There appears to be a statistically significant relation between premature discontinuation and the quality of parenting discipline. However, due to the sensitivity/chance rate ratio (50% versus 32%) it has little practical relevance. In the discriminant model this variable appears to be absent. Due to the included variables, too much variance is being partialled out and therefore excluded from the model. The nature of the variables constituting the model indicates that premature discontinuation of a placement is a function of child characteristics (severity of the child's social problems) as well as foster family characteristics (number of the family's natural children and educational level).

There are two striking things about this model. Firstly, the factor of behavioural problems can be traced as presented in the literature on foster care. The severity of the foster daycare child's behavioural problems partly explains the premature discontinuation of the placement. This does, however, not imply that children with behavioural problems should not be eligible for foster daycare: the risk of a premature discontinuation grows when children with severe behavioural problems are taken up in large foster daycare families. Secondly, it means that premature discontinuation need not be a problem of selection, but may also be a problem of matching. In combination with the table, the discriminant model may serve as a decision model with which the risk of premature discontinuation can be assessed. If the risk is too high, it may be decided not to place the child in the foster daycare family. In time this may signify a reduction in the number of prematurely discontinued placements. In a wider context, a contribution is being made to the improvement of foster daycare. Considering that the model needs to be replicated, it should be applied with care.

References

Appathurai, C., Lowery, G. & Sullivan, T. (1986). Achieving the Vision of Deinstitutionalization: A Role for Foster Care?. *Child and Adolescent Social Work, 3*, 50-67.

Boogaart, P.H.M. van den, Mesman-Schultz, K., Naayer, P.M.H. & Zandberg, Tj. (1989). *Instrumentarium voor programma-evaluatie in de residentiële hulpverlening: de COM-UV.* Leiden: COJ.

Curtis, P.A., Rosman, M.D., & Pappenfort, D.M. (1984). Developing an Instrument for Measuring Psychological Assessment in Clinical Child Welfare. *Child Welfare, 64*, 309-318.

Drenth, P.J.D. & Sijtsma, K. (1990). *Testtheorie.* Houten/Zaventem: Bohn Stafleu Van Loghum.

Fleiss, J.L. (1981). *Statistical Methods for Rates and Proportions.* New York: John Wiley & Sons.

Gibson, T.L., Tracy, G.S. & DeBord, M.S. (1985). An Analysis of Variables Affecting Length of Stay in Foster Care. *Children and Youth Services Review, 6*, 135-145.

Gil, E. (1984). Foster Parents: Set Up to Fail. *Child Abuse and Neglect, 8*, 121-123.

Goldbeck, L. (1984). Pflegeeltern im Rollenkonflikt - Aufgaben einer psychologischen Betreuung von Pflegefamilien. *Praxis der Kinderpsychologie und Kinderpsychiatrie. 33*, 308-317.

Harms, T., & Clifford, R.M. (1989). *Family Day Care Rating Scale.* New York/London: Teachers College, Colombia University.

Horst, W. ter (1980). *Algemene orthopedagogiek.* Kampen: Kok.

Larsson, G., Bohlin, A. & Stenbacka, M. (1986). Prognosis of Children Admitted to Institutional Care During Infancy. *Child Abuse and Neglect, 10*, 361-368.

Lawder, E.A., Poulin, A. & Andrews, R.E. (1986). A Study of 185 Foster Children 5 Years After Placement. *Child Welfare, 65*, 241-251.

Mesman-Schultz, K. (1978). *De COM-procedure.* Rijswijk: CWOK.

Metz, C.E. (1978). Basic Pinciples of ROC Analysis. *Seminars in Nuclear Medicine, 8*, 283-298.

Milner, J.L. (1987). An Ecological Perspective On Duration of Foster Care. *Child Welfare, 66*, 113-123.

Pardeck, J.T.P. (1983). An Empirical Analysis of Behavioral and Emotional Problems of Foster Children as Related to Replacement in Care. *Child Abuse and Neglect, 7*, 75-78.

Pasztor, E.M. (1985). Permanency Planning and Foster Parenting: Implications for Recruitment, Selection, Training and Retention. *Children and Youth Services Review, 7*, 191-205.

Patton, D.D. (1978). Introduction to Clinical Decision Making. *Seminars in Nuclear Medicine, 8*, 273-282.

Reeuwijk, P.M.C. & Berben, E.G.M.J. (1988). *Vrijwillige pleegzorg. Een kwantitatieve analyse.* Den Haag: CWOK.

Robbroecks, L.M.H. & Bastiaensen, P.A.C.M. (1992). Signalementen. De Nederlandse pleegzorg tegen het licht gehouden. *Gezin, 4*, 108-133.

Scholte, E.M. (1995). Het plaatsen van jeugdigen in pleeggezinnen en residentiële centra. *Tijdschrift voor orthopedagogiek, 34*, 99-114.

Seaberg, J.R. & Tolley, E.S. (1986). Predictors of the Length of Stay in Foster Care. *Social Work Research and Abstracts, 22*, 11-17.

Simon, R.D. & Simon, D.K. (1982). The Effect of Parent Selection and Training on Service Delivery. *Child Welfare, 61*, 515-524.

Smith, E.P. & Gutheil, R.H. (1988). Succesful Foster Parenting Recruiting: A Voluntary Agency Effort. *Child Welfare, 69*, 137-146.

Spaans, E.C., Berben, E.G.M.J. & Reeuwijk, P.C.M. (1989). *Vrijwillige pleegzorg. Ervaringen van pleegouders, pleegkinderen en ouders van pleegkinderen.* Den Haag: CWOK.

Steinhauer, P.D. (1988). The Preventive Utilization of Foster Care. *Canadian Journal of Psychiatry, 33*, 459-467.

Stevens, J. (1992). *Applied Multivariate Statistics for the Social Sciences.* New Yersey: Lawrence Erlbaum Associates.

Stone, N.M., & Stone, S.F. (1983). The Prediction of Successful Foster Placement. *Social Casework, 64*, 11-17.

Strijker, J. & Zandberg, Tj. (1991). *Dagpleegzorg. Eerste interimrapport.* Groningen: Stichting Kinderstudies.

Strijker, J. & Zandberg, Tj. (1994). *Dagpleegzorg. Eindrapport.* Groningen: Stichting Kinderstudies.

Strijker, J. (1995). *Dagpleegzorg. Methoden van beïnvloeding en risicovariabelen.* Groningen: Stichting Kinderstudies.

Tinney, M. (1985). Role Perceptions in Foster Parent Associations in British Columbia. *Child Welfare, 64*, 73-79.

Titterington, L. (1990). Foster Care Training: A Comprehensive Approach. *Child Welfare, 69*, 157-165.

Urquhart, L.R. (1989). Separation and Loss: Assessing the Impacts on Foster Parent Retention. *Child and Adolescent Social Work, 6*, 193-209.

Westenberg, M.R.M. & Koele, P. (1993). Klinische besliskunde. In: P. Koele & J. van der Pligt (red.). *Beslissen en beoordelen.* Amsterdam/Meppel: Boom.